

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 841 OF 1501

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Team Ryan

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PALMER, DAVID, , ,

Mailing Address 59-563 LOKELANI PLACE  
P.O. BOX 44557

City  
KAMUELA

State  
HI

Zip Code  
96743-4557

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CAFE PESTO

Occupation (for Individual)  
RESTAURATEUR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1998.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 29 / 2016

Transaction ID : SA11A.343800

Amount of Each Receipt this Period

999.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. PALMER, GEOFFREY, H., MR.,

Mailing Address 270 N CANON DR PH

City

BEVERLY HILLS

State

CA

Zip Code

90210-5312

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GH PALMER & ASSOCIATES

Occupation (for Individual)  
OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 20 / 2016

Transaction ID : SA11A.332852

Amount of Each Receipt this Period

100000.00

☐ Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. PALOMAREZ, REBECCA, , ,

Mailing Address 3405 PINEY POINT DR

City

FLOWER MOUND

State

TX

Zip Code

75022-4773

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
HILL STREET CONSULTING

Occupation (for Individual)  
PRINCIPAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2016

Transaction ID : SA11A.343924

Amount of Each Receipt this Period

1000.00

☐ Memo Item  
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶

101999.00

TOTAL This Period (last page this line number only).....▶